DATENT ADDITOATI	PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number			
Effec	tive October 1, 20	001	RECOF	RD	09/	4	132	71	
CLAIMS A	S FILED - PART			SMALL	ENTITY	<u> </u>	OTHE	R THAN	
TOTAL CLAIMS	(Column 1)	. (Column 2	2)	TYPE		OF	R SMALL		
FOR				RATE			RATE		
	NUMBER FILED	NUMBER E	XTRA	BASIC F	FEE 370.00	O OR	BASIC FEI	E 240.0	
TOTAL CHARGEABLE CLAIMS	/	<u> * /</u>		X\$ 9=	=	OR	X\$18=		
INDEPENDENT CLAIMS	minus 3 =	* /		X42=	<u>-</u>	OR	<u> </u>	+	
MULTIPLE DEPENDENT CLAIM PR	RESENT	L		140.	1		`	+	
* If the difference in column 1 is I	less than zero, enter	"0" in colun	nn 2	+140=		OR	L	10,5	
$A \sim M_{\odot} \sim 10^{-10}$	MENDED - PAR			TOTAL		OR	•	140.1	
(Column 1)	(Colun	nn 2) (Coli	lumn 3)	SMAL	L ENTITY	OR		R THAN ENTITY	
CLAIMS REMAINING	HIGHE NUME	BER PRE	ESENT		ADDI-	7 1		ADDI	
AFTER AMENDMENT	PREVIO PAID F	DUSLY EX	XTRA	RATE	TIONAL FEE	1:1	RATE	TIONA	
	Minus **	(D =	7	X\$ 9=		OR	X\$18=	1	
Independent *	Minus *** 2	3 =/		X42=		1	You	1 N	
FIRST PRESENTATION OF MU	LTIPLE DEPENDENT	CLAIM /				OR		a second	
				+140=		OR	+280=		
14405				ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	450	
(Column 1) CLAIMS	(Colum HIGHE	EST	umn 3)		<u> </u>				
REMAINING AFTER AMENDMENT	NUMB PREVIOL	BER PRE	SENT	RATE	ADDI- TIONAL		RATE	ADDI: TIONA	
THE RESERVE OF THE PARTY OF THE	PAID F	OR	-	* ***	FEE		Salatanian Salatanian	FEE	
	Minus	() = // = //	/	X\$ 9=		OR	X\$18=		
FIRST PRESENTATION OF MUL		CLAIM		X42=		OR	X84=		
				+140=		OR	+280=	- 723 代か。 12条 元。	
	多。安徽 安徽			TOTAL	1.00	OP:	TOTAL	(2) (2) (2) (金麗安) (3)	
(Column 1)	(Columr	n 2) (Colu	ımn 3)	ADDIT FEE		ΣI A	ADDIT/FEE L	788 A	
CLAIMS REMAINING	HIGHES NUMBE	ST	1		ADDI-			ADDI-	
AFTER AMENDMENT	PREVIOU PAID FO	JSLY EXT	/RA	RATE	TIONAL		RATE	TIONA	
THE STATE OF THE S	dinus **			V#0	FEE			FEE	
Independent *	vinus +++			X\$ 9=		OR	X\$18=	<u> </u>	
FIRST PRESENTATION OF MUL	TIPLE DEPENDENT (CLAIM		X42=	100.02	OR	X84=		
			En la	+140=		OR	+280=		
If the entry in column 1 is less than the electric than the electr	For IN THIS SPACE IS IS	oca than DO:	ter "20."	TOTAL	 	OB L	TOTAL	AND STATE	
*If the *Highest Number Previously Paid The *Highest Number Previously Paid F	LEAR IN THIS SPACE IS IS	تعضن وسمستمره		ADDIT. FEE		:AL	DDIT. FEE	AMEN .	